

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA		04/09/01
O.I.P.E. CLASSIFIER	SMW	32	5/2
FORMALITY REVIEW	SMW	SC886	05-08-01
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	6/26/01
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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.9	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
stapl additional sheet h re

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